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CONFIRMATION NO. 3642

SERIAL NUMBER 10/719,633	FILING OR 371(c) DATE 11/21/2003 RULE	CLASS 514	GROUP ART UNIT 1635	ATTORNEY DOCKET NO. 50450-8032.US02
APPLICANTS Patrick L. Iversen, Corvallis, OR;				
** CONTINUING DATA ***** This application is a CON of 09/726,774 11/29/2000 PAT 6,677,153 which claims benefit of 60/168,150 11/29/1999 ** FOREIGN APPLICATIONS *****				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature _____ Initials _____		STATE OR COUNTRY OR	SHEETS DRAWING 11	TOTAL CLAIMS 34 INDEPENDENT CLAIMS 3
ADDRESS 22918				
TITLE Antisense antibacterial method and composition				
FILING FEE RECEIVED 511	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	